AN AYURVEDIC APPROACH OF JALODARA

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ABSTRACT

In Ayurveda Jalodara (ascites) is being considered under the broad spectrum of Udara Rogas. In Ayurveda, 8 type of Udara Roga are being mentioned and every Udara Roga finally converted into incurable Jalodara, not being treated. This is the last stage of every Udara Roga. The common cause of Jalodara is Mandagni and Srotorodha, as per mentioned in Ayurveda. Whereas, Ascites is the most common complication of liver cirrhosis and occurs in about 50% of patients with decompensated cirrhosis in 10 years. In Ayurvedic literature both Shodhana & Shaman Chikitsa and diet restriction is being mentioned for Jalodara. In modern science there is no any medicine available for ascites only one surgical treatment is available that is tapping which also gives temporary relief while Ayurveda gives best results without any injury to body. Mortality increases from complications such as spontaneous bacterial peritonitis and hepatorenal syndrome. Mortality ranges from 15% in a year to 44% in 5 years.

Keywords: Ascites, liver cirrhosis, Nitya Virechan, Jalodhara, Udara Roga, Diet restriction.

INTRODUCTION

Jalodara (ascites) is one of the critical diseases and one among the eight Udara roga popularly known to the common people. Among Tridosha, the Prakupita vata(Aggravated Vata) gets accumulated in Udara between Twak (skin) and Mamsa (muscle tissue) leading to Shotha, this is being termed as Udara roga. Mala Samchaya and Dosha Samchaya occur because of Mandagni which causes Srotorodha of Udakavaha and Rasavaha Srotas. Further it vitiates Prana(heart), Apana(renal), Agni(liver) and ultimetyl causes accumulation of Udaka in the body mainly in Udara, which is cardinal feature of Jalodara. Jalodara considered as a disease, instead of a symptom or a sign of other diseases.

It is of two types i.e. Svatantra (primary or independent) and Paratantra (secondary) that is due to some other disease. Among the six Kriyakala (stages), it corresponds to the fifth stage (manifestation stage) or the 6th stage (the stage of busting open). The Svatantra or primary Jalodara has been described as Dakodara. Charak has proclaimed it to be an incurable disease. Susruta called all Udararoga as “Mahagada” grave ailments and difficult to treat.

According to modern medical science accumulation of free fluid in peritoneal cavity (ascites) occurs in the
complication of hepatic cirrhosis, which can be correlated with Jalodara. According to modern conception ascites is sequel to some other diseases or its complication. Ascites, which is the accumulation of excess fluid in the peritoneal cavity, is often among the first stage of decompositions in the patients with chronic liver disease. Cirrhosis is the underlying cause of the ascites in at least 80% of patients, but other factors (e.g. heart failure, nephritic syndrome, tuberculous peritonitis) must also be considered. The development of ascites in the setting of cirrhosis is an important landmark in the natural history of chronic liver disease, because approximately 50% of patients die within in years. Ascites usually occurs when the liver stops working properly. It is a common clinical finding with a wide range of causes, but develops most frequently as a part of the de-compensation of previously asymptomatic chronic liver disease. The symptoms of ascites vary from patient to patient and depend largely on the quantity of fluid. If trace ascites is present, the patient may be asymptomatic, and fluid is detected only on physical or radiologic examination. If a large amount of fluid is present, the patient may complain of abdominal fullness, early satiety, abdominal pain, or shortness of breathing.

**Sign & symptoms**
1. Aruchi (anorexia)
2. Pipasa Vridhi (excessive thirst)
3. Shool (abdominal pain)
4. Shwaskrichchta (dyspnoea)
5. Kaas (cough)
6. Dorbalya (weakness)
7. Udara Utsedha (abdominal distension)
8. Samparivrita Nabhi (Everted umbilicus)
9. Hrida Spandan (palpitation)
10. Unable to walk
11. Drati Shubyati Kampate (shifting dullness)

**Complication**
1. Vaman (vomiting)
2. Atisaar (diarrhea)
3. Trishna (excessive thirst)
4. Pleural effusion
5. Hikka (hiccough)
6. Mutraghata (retention of urine)
7. Parshwa Shool
8. Tamak Shwasa
9. Kaas

### Analysis of Samprapti Chakra of Jalodara -

**Nidana Sevan**

- **Vata Dushti**
- **Kapha Dushti**
- **Pitta Dushti**

**Agnimandhya**

- **Rasa, Rakta, Udaka Dushti**

- **Ama Utapatti**

- **Udakavaha**

- **Srotorodha**

- **accumulation of Udaka between twak and Mamsa Dhatu**

Jalodara
Dosha Dushya Vivechan in Jalodara –
Dosha – Tridosha – Prana, Agni, Apana
Dushya – Rasa, Udaka, Sweda
Agni – Jatharagni, Dhatwagni
Ama – Jataragni, Dhatwagni
Srotas – Rasa, Sweda, Ambu
Srotodusti – Sanga, Vimargagaman
Udbhava Sthana – Amashaya
Sanchayasthana – Udara, Twakmamsanthara
Adhistana – Udara
Roga Marga – Abhyantara, Bahya

Management
Ascites as a disease has been described extensively in Ayurvedic literature along with medical treatment and surgical procedure related to the management of this condition. Diet restriction is an important feature of the management of this condition.

“Sharirdoshprakope Khalu Sharirmevashrityaya-prayashtrividhnamaushamichchanti- Antaparimaranam, Bahiparimaranam, shastrapranidhanam che-ti.” (Cha.Su.11/55)

Ayurvedic management with drugs such as provocation of digestion, daily therapeutic purgation, stimulant for hepatic function and only milk diet that acts on root of pathology of ascites and by doing Samprapti Bhanga it give good result in Jalodara. In Ayurveda there is mainly three type of Chikitsa has to be done for Jalodara as

- Niranna, Nirjala and Nirlawan Chikitsa
- “Apam Doshaharyado pradadhyadudkodare.” (Cha.Chi.13/93)

As mentioned in Charaka that in Jalodara excessive accumulated waste fluid have to be washed out. So we can use the drugs which have Pittavirechaka or Mutravirechaka properties.

- Due to accumulation of excess amount of Doshas and obstruction in the Shrotomarg, therefore, we should give Shodhan in the Jalodara patient by giving regular Virachana medicine. By giving Virachana accumulated Doshas and fluid goes out and the mouth of the Srotas opens.
- Acharya Vagbhatta has described the Pathya Kalpana in Jalodara. The Jalodara patient is kept on milk only till 6 months. Ushtri milk is said to be best milk in Jalodara. For 3 month one should be given milk and Peya (boiled mashed rice in profuse water). After that liquid khichdi (hotchpocht) with milk must be given for 3 month. Salt and oil is prohibited, during this period. Such kind of treatment should be strictly followed for one year in Jalodara.

Importance of milk in Jalodara-
Milk is being mentioned in the management of all kind of Udara rogast to restore the vital capacity of body & to state the contract of Doshas. Ushtri Dugdha is specially mentioned for Jalodara by Acharyas. In the absence of Ushtri Dugdha Godugdha is preferred by Acharyas. Godugdha (cow milk) is only complete food which is full of nutrients and easily digestible. Milk is said to be as beneficial as nectar for gods, in the patient, who’s body becomes impaired by drug use in Udara Rogas.

Ayurveda too has suggested surgery and removal of fluid as the first line of treatment in Jalodara.

- Vyadhan – Should be done over the Udara or abdomen. Vyadhana means puncturing and removal of fluid. The Vyadhan should be done using Vrihi Mukha Shastra at a distance of 4 Angulas towards the left of Nabhi. The depth should be of the length of half finger. The puncture should be done after having tied a sterile cloth tightly around the abdomen. Into the depth of the opening a Nadi (cannula) should be inserted and the fluid should be drained. The opening should later be applied with Tail and Lavan and later should be cauterized with fire.

Shodhan Chikitsa-
- Nitya Virechan – Virechan or therapeutic purgation should be administered regularly so as to avoid recurrence and restore the Agni by expelling Bahudoshavastha by means Stoka Stoka Nirharanam. It should also be administered once there is evidence of accumulation of even a small amount of fluid.
- “Doshatimatrupchayat Srotomarganirodhnata, Sambhavatiudaram Tasmannitymevavirechayet.” (Cha.Chi. 13/61)

Vasti chikitsa- In case of Jalodara, if the Doshas are not properly expelled out by giving the Virechana,
then such patients should be given Niruha Basti by mixing of Kshara and Gomutra.

**Medicines mentioned in Ayurveda for Jalodara and their properties**

- Gokshura – Mutra Rechan
- Punarnava – Rechan, Shothahara, Deepan
- Jaipal - Deepan, Kaphavataghna, Rechan
- Gomutra – Mutravirechan, Sweda
- Katuki – Bhedniya, Lekhan, Kaphahara
- Manjishtha – Vishahara, Shothahara, Kaphahara
- Markandika(Sanaya) – Urdhwa-Adhahkaya Shodhini, Vishahara
- Makaya – Shothahara, Yakritautejak, Pittasarak
- Kasani – Potent hepatoprotective action & Yakrituttejak
- Mishi – Agnimandhyahara, Ushna, Pachani
- Munakka - Virechnopaga, Deepan
- Ksheera – Pittavirechan, Balya, Trishna Shaman

**Drug used in Jalodara**

- Eranda Taila with Gomutra
- Eranda Taila with Gudugdha

**Table No.1 Showing Pathya and Apathya**

<table>
<thead>
<tr>
<th>Pathya</th>
<th>Apathya</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raktashaali</td>
<td>Anoopaja Mamsa/Shaaka</td>
</tr>
<tr>
<td>Yava</td>
<td>Tilaan</td>
</tr>
<tr>
<td>Mudga</td>
<td>Vyayama, Adhwa</td>
</tr>
<tr>
<td>Ajmoda, Jeera, Mishi</td>
<td>Divaswapna</td>
</tr>
<tr>
<td>Ksheera (Camal milk)</td>
<td>Abhisyandi Dravya-Dahi</td>
</tr>
<tr>
<td>Gomutra</td>
<td>Matradhiya Anna</td>
</tr>
<tr>
<td>Arishta</td>
<td>Smoking</td>
</tr>
<tr>
<td>Asava</td>
<td>Ushna/ lavan/Amla Dravya</td>
</tr>
<tr>
<td>Takra</td>
<td>Snehaapan</td>
</tr>
<tr>
<td>Lahsun, Ardraka</td>
<td>Guru Anna</td>
</tr>
<tr>
<td>Anaara</td>
<td>Yaan / Vahan Savari</td>
</tr>
<tr>
<td>Haritaki</td>
<td>Ati Jalapana</td>
</tr>
<tr>
<td>Langhan</td>
<td>Starchi food- rice, potato</td>
</tr>
<tr>
<td>Vastra Patta Bandhan on abdomen</td>
<td>Dairy products, processed food- pizza, burger</td>
</tr>
</tbody>
</table>

**DISCUSSION**

Udara roga is Swedavaha and Ambuvaha Srotodushti Vikar due to Jatharagnimandata, Pranavayu and Apanavyu Dushti. Due to obstruction of Swedavaha Ambuvaha Srotas excessive accumulation of fluid, especially in peritoneal cavity occurs.

According to Ayurveda treatment of Udara Roga Nitya Virechana (purgative), Agnideepan (increase appetite), Balaprapti (increase strength) and Yakrituttejjak (stimulant for hepatic function).
Nitya Virechana is the line of treatment in Udara Roga and hence Virechana Aushadha are the first choice of drug in such a case. Virechana checks improper Jatharagni and Dhatvagni, after Virechana Jatharagni and Dhatvagni increases. It has laxative action which helps to eliminate toxins out of the body, which are caused due to chronic constipation in Jalodara. Above Nidanas lead to Jatharagni and Dhatwagnimandya. Hence Mandagni is considered as the prime factor in the manifestation of Udara. Hence correction of Agni has to be done with the Vatanulomana Dravyas like Hingvashtaka Churna and Haritaki with Gomutra does Deepan, Pachana and further support Samprapthi Vighatana. Since Srotorodha occurs in Udara, it is necessary to go for Srotoshodhana in order to remove the obstruction by using Teekshna, Ushna, Kshara Dravya. Simultaneously there will be removal of Apya Dosha by means of Mutra Yukta Teekshna Ksharadi Aushadhis.

CONCLUSION

Jalodara is described in Ayurveda as the type of Udara Roga. The management of this disease complex is difficult due to presence of complications. The pathological factors are responsible for Udarvyadhi are Tridosha and reduced status of Agni. Virechana is unique treatment mentioned for udara. Removal of Doshas mainly Pitta and normalize Yakritudushit which was caused due to Agni Mandhya was achieved by this integrated approach of Ayurvedic treatment successfully. Ayurvedic treatment is found very effective in the management of Jalodara. Through the Srotoshodhak principle the root cause is treated and this improved the normal functioning of body. The Ayurvedic treatment is safe, cost effective and has no side effect. The Ayurvedic management of Jalodara mainly focuses upon Nidana Parivarjan, correcting Agni, Srotoshodhan and Nitya Virechana.

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